

Title 30. PROFESSIONS AND OCCUPATIONS

Part 2301. Regulations Adopted by the Mississippi State Board of Dental Examiners

Chapter 1.

Rule 1.29. BOARD REGULATION NUMBER 29-ADMINISTRATION OF ANES-THESIA

Purpose: Pursuant to Miss. Code Ann. § 73-9-13, to promulgate rules for the administration of anesthesia in the dental office to allow dentists to provide patients with the benefits of anxiety and pain control in a safe and efficacious manner.

1. Definitions of Terminology Used Herein

- A. Analgesia - the diminution or elimination of pain.
- B. Anti-Anxiety Sedative - a sedative agent administered in a dosage intended to reduce anxiety without diminishing consciousness or protective reflexes.
- C. Anxiolysis (Minimal Sedation) - pharmacological reduction of anxiety through the administration of a minor psychosedative/tranquilizer, which allows for uninterrupted interactive ability in a totally awake patient with no compromise in the ability to maintain a patent airway continuously and without assistance. The total dosage cannot exceed 1.5 MRD (maximum recommended dosage). Dentists administering anxiolysis (minimal sedation) shall prescribe only a single agent to each patient (no multiple drugs or combination drug regimens). *When the intent is minimal sedation for adults, the appropriate initial dosing of a single enteral drug is no more than the MRD of a drug that can be prescribed for unmonitored home use.
- D. Behavioral Management - the use of pharmacological or psychological techniques, singly or in combination, to modify behavior to a level that dental treatment can be performed effectively and efficiently.
- E. Clinically Oriented Experiences - clinical patient cases which are presented outside a clinical environment and in an instructional setting, e.g., video presentations.
- F. Clinical Patient Cases - procedures involving live patients either performed or observed in a clinical environment and in an instructional setting.

- G. Combination Inhalation Enteral Anxiolysis - when nitrous-oxide is used in combination with an enteral agent with the intent of achieving anxiolysis only, and the appropriate dosage of agents is administered.
- H. Competent - displaying special skill or knowledge derived from training and experience.
- I. Conscious Sedation (Moderate Sedation) - a minimally depressed level of consciousness beyond anxiolysis that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command, and that is produced by pharmacologic or nonpharmacologic agents, or a combination thereof. In accordance with this particular definition, the drugs or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely (also see definitions for Combination Inhalation Enteral Anxiolysis, Enteral Conscious Sedation, General Anesthesia, and Parenteral Conscious Sedation).
- J. Dental Facility - the office where a permit holder practices dentistry and provides anesthesia/sedation services.
- K. Dental Facility Inspection - an on-site inspection to determine if a dental facility where the applicant proposes to provide anesthesia/sedation is supplied, equipped, staffed and maintained in a condition to support provision of anesthesia/sedation services that meet the minimum standard of care; may be required by the Board prior to the issuance of a sedation/anesthesia permit or any time during the term of the permit.
- L. Direct Supervision - the dentist responsible for the sedation/anesthesia procedure shall be physically present in the office and shall be continuously aware of the patient's physical status and well-being.
- M. Enteral Conscious Sedation - conscious sedation that is achieved by administration of pharmacological agents through the alimentary tract either orally or rectally.
- N. General Anesthesia - the intended controlled state of depressed consciousness produced by pharmacologic agents and accompanied by a partial or complete loss of protective reflexes, including the ability to maintain an airway and respond purposefully to physical stimulation or verbal commands.
- O. Hospital Facility - a "hospital" or "ambulatory surgical facility" as those terms are defined in Miss. Code Ann. § 41-7-173(h).
- P. Immediately Available - on-site in the dental facility and available for immediate use.

- Q. Local Anesthesia - the elimination of sensations, especially pain, in one part of the body by the regional application or injection of a drug.
- R. May - indicates freedom or liberty to follow a reasonable alternative.
- S. Minor Psychosedative/Tranquilizer - pharmacological agent which allows for uninterrupted interactive ability in a patient with no compromise in the ability to maintain a patent airway continuously and without assistance and carry a margin of safety wide enough to render unintended loss of consciousness unlikely.
- T. Must or Shall - indicates an imperative need or duty or both; an essential or indispensable item; mandatory.
- U. Nitrous-Oxide Inhalation Anxiolysis - the inhalational use of nitrous oxide for anxiolysis and/or analgesia.
- V. Parenteral Conscious Sedation - the intravenous, intramuscular, subcutaneous, intranasal, or transdermal administration of pharmacological agents with the intent to obtain a depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal commands.
- W. Pediatric Clinical Patient Cases - clinical patient cases on patients twelve (12) years of age and under.
- X. Protective Reflexes - includes the ability to swallow and cough.
- Y. Special Health Care Needs Patients - persons having a physical, developmental, mental, sensory, behavioral, cognitive, or emotional impairment or limiting condition that requires medical management, health care intervention, and/or use of specialized services or programs; the condition may be developmental or acquired and may cause limitations in performing daily self-maintenance activities or substantial limitations in a major life activity; and health care for special needs patients is beyond that considered routine and requires specialized knowledge, increased awareness and attention, and accommodation.
- Z. Vested Adult - a responsible adult who is the legal parent or guardian, or designee of a legal parent or guardian, entrusted with the care of a patient following the administration of anxiolysis, general anesthesia, or conscious sedation.

2. General Guidelines for Using Anesthesia

- A. Any person licensed to practice dentistry in the State of Mississippi shall be authorized to use anesthesia in accordance with the provisions of this section.
- B. All drugs utilized by licensed dentists for anxiolysis, enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia shall be selected and utilized in accordance with the drug manufacturer's guidelines as set forth in Food and Drug Administration (hereinafter referred to as "FDA") approved labeling or peer-reviewed scientific literature, including, but not limited to, indications of usage, dosage amounts, and safety requirements for each drug so utilized.
- C. Appropriate safety training and equipment for each drug utilized will be required.
- D. When anesthesia is administered in a dental facility, the following general guidelines apply:
 - 1. A licensed dentist may employ or work in conjunction with a qualified anesthesiologist or Certified Registered Nurse Anesthetist (hereinafter referred to as "CRNA") who practices in an accredited hospital, provided that such anesthesiologist or CRNA remains on the premises of the dental facility until any patient given any level of anesthetic requiring a permit regains consciousness and is discharged.
 - 2. Prior to employing or working in conjunction with an anesthesiologist who administers enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia in a dental facility, the operating dentist must possess a currently valid Board-issued anesthesia permit which is commensurate with the level of anesthesia being administered by the anesthesiologist, and which permit has been issued in accordance with the guidelines hereinafter stipulated.
 - 3. As used in paragraphs 1 and 2 above, "anesthesiologist" includes either a licensed dentist board certified by the American Dental Board of Anesthesiology or a physician board certified by the American Board of Anesthesiologists or American Osteopathic Board of Anesthesiology.
 - 4. Prior to applying to the Mississippi Board of Nursing (hereinafter "Nursing Board") to enter into a Nursing Board-approved collaborative/consultative relationship with a CRNA which includes protocols/practice guidelines for the administration of enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia by a CRNA, the operating dentist must possess a currently valid Board-issued anesthesia permit which is commensurate with the

level of anesthesia being administered by the CRNA, and which permit has been issued in accordance with the guidelines hereinafter stipulated.

E. When anesthesia is administered in a hospital facility, the following general guideline applies:

1. A licensed dentist may employ or work in conjunction with a qualified anesthesiologist or CRNA who practices in an accredited hospital pursuant to the provisions of the "Minimum Standards of Operation for Mississippi Hospitals," as published by the Mississippi State Department of Health, provided that such anesthesiologist or CRNA remains on the premises of the hospital facility until any patient given any level of anesthetic requiring a permit regains consciousness and is discharged. The accredited hospital's department of anesthesia, or in the absence thereof the department of surgery, has the responsibility for establishing general policies and procedures for the administration of anesthesia.

3. Board Permits Not Required For the following, Board permits are not required:

- A. Local Anesthesia. All licensed dentists are herein authorized to use local anesthesia.
- B. Nitrous-Oxide Inhalation Anxiolysis. A licensed dentist may employ or use nitrous-oxide inhalation anxiolysis on an outpatient basis for dental patients without making application to the Board, provided such dentist satisfies one or more of the following criteria prior to administration of nitrous-oxide inhalation anxiolysis:

1. Completion of not less than a two-day course of training as described in the American Dental Association's (hereinafter referred to as "ADA") "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students," or its equivalent.
2. Completion of training equivalent to that described above while a student in an ADA-accredited undergraduate dental school program.

A licensed dentist may instruct a competent dental auxiliary as to the placement and monitoring of nitrous-oxide inhalation anxiolysis under his/her direct supervision, such supervision as defined in Rule 1.13 Board Regulation 13.

- C. Combination Inhalation Enteral Anxiolysis. A licensed dentist may employ or use combination inhalation enteral anxiolysis on an outpatient basis for dental patients

without making application to the Board, i.e., the use of nitrous-oxide in combination with another agent to produce anxiolysis within appropriate dosages.

4. Board Permits Required

For the following, Board permits are required:

- A. Enteral Conscious Sedation. No licensed dentist shall use enteral conscious sedation in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. For example, conscious sedation can be achieved through inhalation agents and/or multiple doses of oral medications. Regardless of the enteral technique utilized, a dentist must have a permit to sedate a patient beyond anxiolysis.
- B. Parenteral Conscious Sedation. No licensed dentist shall use parenteral conscious sedation in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. The issuance of a permit for parenteral conscious sedation shall include the privileges of administering enteral conscious sedation in accordance with the provisions of this section.
- C. General Anesthesia. No licensed dentist shall use general anesthesia in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. The issuance of a permit for general anesthesia shall include the privileges of administering parenteral conscious sedation and enteral conscious sedation in accordance with the provisions of this section.

5. Criteria and Application for Anesthesia Permits

- A. Enteral Conscious Sedation. A permit is required prior to administration of enteral conscious sedation, and in order to receive such permit, the dentist must do the following:
 - 1. Apply on a prescribed application form to the Board;
 - 2. Submit the specified application fee as stipulated in Section 10 of this regulation;
 - 3. Produce evidence of a current Advanced Cardiac Life Support (hereinafter referred to as "ACLS") certificate, or a certificate from a Board-approved course; and
 - 4. Provide evidence of one or more of the following:
 - (a) Completion of formal training, sponsored by or affiliated with a university, teaching hospital, or other program approved by the Board or part of the undergraduate curriculum of an accredited dental school, in the

use of enteral conscious sedation, and certification by the institution wherein the training was received to be competent in the administration of enteral conscious sedation. Such certification shall specify the type, number of hours, and length of training. For dentists who administer enteral conscious sedation to patients who are twelve (12) years of age or under, or who are thirteen (13) years of age or older and who are deemed to be patients with special health care needs as previously defined, the minimum number of didactic hours shall be fifty (50), with a minimum of twenty-five (25) hours pediatric-specific, and the minimum number of clinical patient cases shall be ten (10), with a minimum of five (5) being pediatric clinical patient cases. For dentists who administer enteral conscious sedation to patients who are thirteen (13) years of age or older and who are not deemed to be patients with special health care needs, the minimum number of didactic hours shall be twenty-two (22) and the minimum number of clinically oriented experiences shall be fifteen (15). The training program must include physical evaluation, enteral conscious sedation, airway management monitoring, and emergency management. The preceding is necessary for recognition of the formal training program. For the purpose of this subsection, training programs in enteral conscious sedation that satisfy the requirements described in Parts I and III of the ADA's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" at the time training was commenced, shall be deemed by the Board as approved training programs, wherein the hours of didactic training and the number of clinical patient cases shall be credited to the minimum amounts noted above.

- (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage enteral conscious sedation, commensurate with these guidelines.
- (c) Until June 30, 2005, fulfillment of all requirements for grandfathering concerning administration of enteral conscious sedation by successfully completing an appropriate examination which includes:
 - (i) Demonstration of five (5) or more years of routinely administering enteral conscious sedation immediately prior to making application for an enteral conscious sedation permit;
 - (ii) Discussion and review of three (3) cases including anesthetic technique;

(iii) Review of records; and

(iv) Demonstration of managing emergencies.

B. Parenteral Conscious Sedation. A permit is required prior to administration of parenteral conscious sedation, and in order to receive such permit, the dentist must do the following:

1. Apply on a prescribed application form to the Board;
2. Submit the specified application fee as stipulated in Section 10 of this regulation;
3. Produce evidence of a current ACLS certificate, or a certificate from a Board-approved course; and
4. Provide evidence of one or more of the following:
 - (a) Completion of formal training, sponsored by or affiliated with a university, teaching hospital, or other program approved by the Board or part of the undergraduate curriculum of an accredited dental school, in the use of parenteral conscious sedation, and certification by the institution wherein the training was received to be competent in the administration of parenteral -conscious sedation. Such certification shall specify the type, number of hours, and length of training. For dentists who administer parenteral conscious sedation to patients who are twelve (12) years of age or under, or who are thirteen (13) years of age or older and deemed to be patients with special health care needs as previously defined, the minimum number of didactic hours shall be sixty (60), with a minimum of twenty-five (25) hours pediatric-specific, and the minimum number of clinical patient cases shall be twenty (20), with a minimum of five (5) being pediatric clinical patient cases. For dentists who administer parenteral conscious sedation to patients who are thirteen (13) years of age or older and who are not deemed to be patients with special health care needs, the minimum number of didactic hours shall be sixty (60), and the minimum number of clinical patient cases shall be twenty (20). The preceding is necessary for recognition of the formal training program. For the purpose of this subsection, training programs in parenteral conscious sedation that satisfy the requirements described in Parts I and III of the ADA's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" at the time training was commenced, shall be deemed by the Board as approved training programs, wherein the hours of didactic training and the number of clinical patient cases shall be credited to the minimum amounts noted above.

- (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage parenteral conscious sedation, commensurate with these guidelines.
- C. General Anesthesia. A permit is required prior to administration of general anesthesia, and in order to receive such permit, the dentist must do the following:
 - 1. Apply on a prescribed application form to the Board;
 - 2. Submit the specified application fee as stipulated in Section 10 of this regulation;
 - 3. Produce evidence of a current ACLS certificate, or a certificate from a Board-approved course; and
 - 4. Provide evidence of one or more of the following:
 - (a) Completion of an advanced training program in anesthesia and related academic subjects beyond the undergraduate dental curriculum that satisfies the requirements described in Parts I, II, and III of the ADA's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" at the time training was commenced.
 - (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage general anesthesia, commensurate with these guidelines.
- 6. Facilities Wherein Anesthesia Is Administered
 - A. All facilities wherein any anesthesia is administered must be properly equipped for the administration of anesthesia and staffed with a supervised team of auxiliary personnel capable of reasonably assisting the dentist with procedures, problems, and emergencies incident thereto. The adequacy of the dental facility and competence of the anesthesia team shall be determined by the Board.
 - B. The Board adopts the standards regarding the equipment within a dental facility as set forth by the American Association of Oral and Maxillofacial Surgeons (hereinafter referred to as "AAOMS") in the "Office Anesthesia Evaluation Manual," latest edition, as the standards by which each dentist administering enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia must meet. Certification of offices by AAOMS as meeting the standards adopted constitutes a prima facie showing that the

dentist meets the standards. Copies of the "Office Anesthesia Evaluation Manual" are available from AAOMS at 9700 West Bryn Mawr Avenue, Rosemont, IL 60018-5701.

- C. Any dentist administering enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia at a dental facility other than that dentist's own office or dental facility must ensure that the proper equipment and personnel as required above are present.

7. Site Visits and Periodic Inspections Pertaining to Enteral Conscious Sedation, Parenteral Conscious Sedation, and/or General Anesthesia Permits

- A. Prior to the issuance of such permits the Board shall conduct an on-site inspection of the dental facility, equipment, and personnel to determine if, in fact, the aforementioned requirements have been met. This evaluation shall be carried out in a manner prescribed by the Board, and the cost thereof shall be included in the anesthesia permit application fee. Evaluations shall be performed by a minimum of two (2) qualified experts, as determined by the Board.
- B. Any missing or malfunctioning equipment shall be called to the attention of the applicant, and a permit shall not be issued until the Board's experts determine that all equipment is available and properly functioning. If the results of the initial evaluation are deemed unsatisfactory, the applicant may request another review.
- C. All facilities wherein enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia may be administered shall be inspected at least once every five (5) years beginning from the date of the initial permit, as designated by the Board, to ensure that all equipment is of the appropriate type and in good working order. The Board also shall have the discretion to inspect any dental facility at any time for good cause. Any permitted dentist with missing or malfunctioning equipment shall cease administering anesthesia until his/her dental facility has been properly equipped with the required equipment or until such malfunctioning equipment has been satisfactorily repaired and until such time as the Board is in receipt of proof that the equipment has been repaired to the Board's satisfaction.

8. Advanced Cardiac Life Support and Cardiopulmonary Resuscitation

- A. Any dentist using enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia shall at all times be ACLS certified or hold a certificate from a Board-approved course, and his/her auxiliary personnel must meet the requirements for Cardiopulmonary Resuscitation (hereinafter referred to as "CPR") as set forth in Rule 1.45 Board Regulation 45.

- B. A dentist utilizing nitrous-oxide inhalation anxiolysis and his/her auxiliary personnel must meet the requirements for CPR as set forth in Rule 1.45 Board Regulation 45.
9. Renewal of Enteral Conscious Sedation, Parenteral Conscious Sedation, and/or General Anesthesia Permits
- A. Any dentist holding a permit of authorization issued by the Board shall be subject to review, and such permit must be renewed at the same time as the dentist renews his/her Mississippi dental license.
 - B. The Board shall, in accordance with its laws, rules, and regulations, together with the appropriate and required information and renewal fee, renew the enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia permit, unless the holder is informed in writing that a re-evaluation of credentials and/or facilities is to be required. In determining whether such re-evaluation is necessary, the Board shall consider such factors as it deems pertinent, including, but not limited to, patient complaints and reports of adverse occurrences.
 - C. At the time the dentist renews his/her enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia permit, he/she shall submit proof of current ACLS certification and current CPR certification for all dental auxiliaries who have direct patient care responsibilities.
 - D. Certification cards issued by the Board upon renewal of anesthesia permits shall indicate the date wherein the required periodic five (5) year inspection is due to be performed by the Board.
10. Permit Fees
- For the purpose of determining permit fees only, the fees for enteral conscious sedation and/or parenteral conscious sedation permits shall be deemed to be equivalent to those as set forth in Miss. Code Ann. § 73-9-43 and Rule 1.37 Board Regulation 37 for general anesthesia permits.
11. Penalties for Non-Compliance Violating the provisions of this regulation shall subject the dentist to disciplinary action, after a hearing, as provided by the Mississippi laws pertaining to the practice of dentistry.

History: Regulation Twenty-Nine adopted by the Mississippi State Board of Dental Examiners June 4, 1987; amended May 4, 1990; amended September 25, 1992; amended December 4, 1992; amended December 8, 1995; amended February 9, 1996; amended July 21, 2000; amended December 7, 2001; amended March 5, 2004; amended November 19, 2004; amended

January 7, 2005; amended December 2, 2005; amended February 24, 2006; amended October 19, 2007; amended May 16, 2008; amended August 19, 2011

Source: Miss. Code Ann. § 73-9-19.

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Chapter 1.

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1. Definitions of Terminology Used Herein

- A. Analgesia - the diminution or elimination of pain.
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- C. Anxiolysis (Minimal Sedation) - pharmacological reduction of anxiety through the administration of a minor psychosedative/tranquilizer, which allows for uninterrupted interactive ability in a totally awake patient with no compromise in the ability to maintain a patent airway continuously and without assistance. The total dosage cannot exceed 1.5 MRD (maximum recommended dosage). Dentists administering anxiolysis (minimal sedation) shall prescribe only a single agent to each patient (no multiple drugs or combination drug regimens). *When the intent is minimal sedation for adults, the appropriate initial dosing of a single enteral drug is no more than the MRD of a drug that can be prescribed for unmonitored home use.
- D. Behavioral Management - the use of pharmacological or psychological techniques, singly or in combination, to modify behavior to a level that dental treatment can be performed effectively and efficiently.
- E. Clinically Oriented Experiences - clinical patient cases which are presented outside a clinical environment and in an instructional setting, e.g., video presentations.
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- G. Combination Inhalation Enteral Anxiolysis - when nitrous-oxide is used in combination with an enteral agent with the intent of achieving anxiolysis only, and the appropriate dosage of agents is administered.
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- I. Conscious Sedation (Moderate Sedation) - a minimally depressed level of consciousness beyond anxiolysis that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command, and that is produced by pharmacologic or nonpharmacologic agents, or a combination thereof. In accordance with this particular definition, the drugs or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely (also see definitions for Combination Inhalation Enteral Anxiolysis, Enteral Conscious Sedation, General Anesthesia, and Parenteral Conscious Sedation).
- J. Dental Facility - the office where a permit holder practices dentistry and provides anesthesia/sedation services.
- K. Dental Facility Inspection - an on-site inspection to determine if a dental facility where the applicant proposes to provide anesthesia/sedation is supplied, equipped, staffed and maintained in a condition to support provision of anesthesia/sedation services that meet the minimum standard of care; may be required by the Board prior to the issuance of a sedation/anesthesia permit or any time during the term of the permit.
- L. Direct Supervision - the dentist responsible for the sedation/anesthesia procedure shall be physically present in the office and shall be continuously aware of the patient's physical status and well-being.
- M. Enteral Conscious Sedation - conscious sedation that is achieved by administration of pharmacological agents through the alimentary tract either orally or rectally.
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2. General Guidelines for Using Anesthesia

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- C. Appropriate safety training and equipment for each drug utilized will be required.
- D. When anesthesia is administered in a dental facility, the following general guidelines apply:
 - 1. A licensed dentist may employ or work in conjunction with a qualified anesthesiologist or Certified Registered Nurse Anesthetist (hereinafter referred to as "CRNA") who practices in an accredited hospital, provided that such anesthesiologist or CRNA remains on the premises of the dental facility until any patient given any level of anesthetic requiring a permit regains consciousness and is discharged.
 - 2. Prior to employing or working in conjunction with an anesthesiologist who administers enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia in a dental facility, the operating dentist must possess a currently valid Board-issued anesthesia permit which is commensurate with the level of anesthesia being administered by the anesthesiologist, and which permit has been issued in accordance with the guidelines hereinafter stipulated.
 - 3. As used in paragraphs 1 and 2 above, "anesthesiologist" includes either a licensed dentist board certified by the American Dental Board of Anesthesiology or a physician board certified by the American Board of Anesthesiologists or American Osteopathic Board of Anesthesiology.
 - 4. Prior to applying to the Mississippi Board of Nursing (hereinafter "Nursing Board") to enter into a Nursing Board-approved collaborative/consultative relationship with a CRNA which includes protocols/practice guidelines for the administration of enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia by a CRNA, the operating dentist must possess a currently valid Board-issued anesthesia permit which is commensurate with the level of anesthesia being administered by the CRNA, and which permit has been issued in accordance with the guidelines hereinafter stipulated.

E. When anesthesia is administered in a hospital facility, the following general guideline applies:

1. A licensed dentist may employ or work in conjunction with a qualified anesthesiologist or CRNA who practices in an accredited hospital pursuant to the provisions of the "Minimum Standards of Operation for Mississippi Hospitals," as published by the Mississippi State Department of Health, provided that such anesthesiologist or CRNA remains on the premises of the hospital facility until any patient given any level of anesthetic requiring a permit regains consciousness and is discharged. The accredited hospital's department of anesthesia, or in the absence thereof the department of surgery, has the responsibility for establishing general policies and procedures for the administration of anesthesia.

3. Board Permits Not Required For the following, Board permits are not required:

A. Local Anesthesia. All licensed dentists are herein authorized to use local anesthesia.

B. Nitrous-Oxide Inhalation Anxiolysis. A licensed dentist may employ or use nitrous-oxide inhalation anxiolysis on an outpatient basis for dental patients without making application to the Board, provided such dentist satisfies one or more of the following criteria prior to administration of nitrous-oxide inhalation anxiolysis:

1. Completion of not less than a two-day course of training as described in the American Dental Association's (hereinafter referred to as "ADA") "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students," or its equivalent.
2. Completion of training equivalent to that described above while a student in an ADA-accredited undergraduate dental school program.

A licensed dentist may instruct a competent dental auxiliary as to the placement and monitoring of nitrous-oxide inhalation anxiolysis under his/her direct supervision, such supervision as defined in Rule 1.13 Board Regulation 13.

C. Combination Inhalation Enteral Anxiolysis. A licensed dentist may employ or use combination inhalation enteral anxiolysis on an outpatient basis for dental patients without making application to the Board, i.e., the use of nitrous-oxide in combination with another agent to produce anxiolysis within appropriate dosages.

4. Board Permits Required

For the following, Board permits are required:

- A. Enteral Conscious Sedation. No licensed dentist shall use enteral conscious sedation in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. For example, conscious sedation can be achieved through inhalation agents and/or multiple doses of oral medications. Regardless of the enteral technique utilized, a dentist must have a permit to sedate a patient beyond anxiolysis.
- B. Parenteral Conscious Sedation. No licensed dentist shall use parenteral conscious sedation in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. The issuance of a permit for parenteral conscious sedation shall include the privileges of administering enteral conscious sedation in accordance with the provisions of this section.
- C. General Anesthesia. No licensed dentist shall use general anesthesia in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. The issuance of a permit for general anesthesia shall include the privileges of administering parenteral conscious sedation and enteral conscious sedation in accordance with the provisions of this section.

5. Criteria and Application for Anesthesia Permits

- A. Enteral Conscious Sedation. A permit is required prior to administration of enteral conscious sedation, and in order to receive such permit, the dentist must do the following:
 - 1. Apply on a prescribed application form to the Board;
 - 2. Submit the specified application fee as stipulated in Section 10 of this regulation;
 - 3. Produce evidence of a current Advanced Cardiac Life Support (hereinafter referred to as "ACLS") certificate, or a certificate from a Board-approved course; and
 - 4. Provide evidence of one or more of the following:
 - (a) Completion of formal training, sponsored by or affiliated with a university, teaching hospital, or other program approved by the Board or part of the undergraduate curriculum of an accredited dental school, in the use of enteral conscious sedation, and certification by the institution wherein the training was received to be competent in the administration of

enteral conscious sedation. Such certification shall specify the type, number of hours, and length of training. For dentists who administer enteral conscious sedation to patients who are twelve (12) years of age or under, or who are thirteen (13) years of age or older and who are deemed to be patients with special health care needs as previously defined, the minimum number of didactic hours shall be fifty (50), with a minimum of twenty-five (25) hours pediatric-specific, and the minimum number of clinical patient cases shall be ten (10), with a minimum of five (5) being pediatric clinical patient cases. For dentists who administer enteral conscious sedation to patients who are thirteen (13) years of age or older and who are not deemed to be patients with special health care needs, the minimum number of didactic hours shall be twenty-two (22) and the minimum number of clinically oriented experiences shall be fifteen (15). The training program must include physical evaluation, enteral conscious sedation, airway management monitoring, and emergency management. The preceding is necessary for recognition of the formal training program. For the purpose of this subsection, training programs in enteral conscious sedation that satisfy the requirements described in Parts I and III of the ADA's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" at the time training was commenced, shall be deemed by the Board as approved training programs, wherein the hours of didactic training and the number of clinical patient cases shall be credited to the minimum amounts noted above.

- (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage enteral conscious sedation, commensurate with these guidelines.
- (c) Until June 30, 2005, fulfillment of all requirements for grandfathering concerning administration of enteral conscious sedation by successfully completing an appropriate examination which includes:
 - (i) Demonstration of five (5) or more years of routinely administering enteral conscious sedation immediately prior to making application for an enteral conscious sedation permit;
 - (ii) Discussion and review of three (3) cases including anesthetic technique;
 - (iii) Review of records; and

(iv) Demonstration of managing emergencies.

- B. Parenteral Conscious Sedation. A permit is required prior to administration of parenteral conscious sedation, and in order to receive such permit, the dentist must do the following:
1. Apply on a prescribed application form to the Board;
 2. Submit the specified application fee as stipulated in Section 10 of this regulation;
 3. Produce evidence of a current ACLS certificate, or a certificate from a Board-approved course; and
 4. Provide evidence of one or more of the following:
 - (a) Completion of formal training, sponsored by or affiliated with a university, teaching hospital, or other program approved by the Board or part of the undergraduate curriculum of an accredited dental school, in the use of parenteral conscious sedation, and certification by the institution wherein the training was received to be competent in the administration of parenteral -conscious sedation. Such certification shall specify the type, number of hours, and length of training. For dentists who administer parenteral conscious sedation to patients who are twelve (12) years of age or under, or who are thirteen (13) years of age or older and deemed to be patients with special health care needs as previously defined, the minimum number of didactic hours shall be sixty (60), with a minimum of twenty-five (25) hours pediatric-specific, and the minimum number of clinical patient cases shall be twenty (20), with a minimum of five (5) being pediatric clinical patient cases. For dentists who administer parenteral conscious sedation to patients who are thirteen (13) years of age or older and who are not deemed to be patients with special health care needs, the minimum number of didactic hours shall be sixty (60), and the minimum number of clinical patient cases shall be twenty (20). The preceding is necessary for recognition of the formal training program. For the purpose of this subsection, training programs in parenteral conscious sedation that satisfy the requirements described in Parts I and III of the ADA's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" at the time training was commenced, shall be deemed by the Board as approved training programs, wherein the hours of didactic training and the number of clinical patient cases shall be credited to the minimum amounts noted above.

- (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage parenteral conscious sedation, commensurate with these guidelines.
- C. General Anesthesia. A permit is required prior to administration of general anesthesia, and in order to receive such permit, the dentist must do the following:
 - 1. Apply on a prescribed application form to the Board;
 - 2. Submit the specified application fee as stipulated in Section 10 of this regulation;
 - 3. Produce evidence of a current ACLS certificate, or a certificate from a Board-approved course; and
 - 4. Provide evidence of one or more of the following:
 - (a) Completion of an advanced training program in anesthesia and related academic subjects beyond the undergraduate dental curriculum that satisfies the requirements described in Parts I, II, and III of the ADA's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" at the time training was commenced.
 - (b) Completion of an ADA-accredited post-doctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage general anesthesia, commensurate with these guidelines.
- 6. Facilities Wherein Anesthesia Is Administered
 - A. All facilities wherein any anesthesia is administered must be properly equipped for the administration of anesthesia and staffed with a supervised team of auxiliary personnel capable of reasonably assisting the dentist with procedures, problems, and emergencies incident thereto. The adequacy of the dental facility and competence of the anesthesia team shall be determined by the Board.
 - B. The Board adopts the standards regarding the equipment within a dental facility as set forth by the American Association of Oral and Maxillofacial Surgeons (hereinafter referred to as "AAOMS") in the "Office Anesthesia Evaluation Manual," latest edition, as the standards by which each dentist administering enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia must meet. Certification of offices by AAOMS as meeting the standards adopted constitutes a prima facie showing that the

dentist meets the standards. Copies of the "Office Anesthesia Evaluation Manual" are available from AAOMS at 9700 West Bryn Mawr Avenue, Rosemont, IL 60018-5701.

- C. Any dentist administering enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia at a dental facility other than that dentist's own office or dental facility must ensure that the proper equipment and personnel as required above are present.

7. Site Visits and Periodic Inspections Pertaining to Enteral Conscious Sedation, Parenteral Conscious Sedation, and/or General Anesthesia Permits

- A. Prior to the issuance of such permits the Board shall conduct an on-site inspection of the dental facility, equipment, and personnel to determine if, in fact, the aforementioned requirements have been met. This evaluation shall be carried out in a manner prescribed by the Board, and the cost thereof shall be included in the anesthesia permit application fee. Evaluations shall be performed by a minimum of two (2) qualified experts, as determined by the Board.
- B. Any missing or malfunctioning equipment shall be called to the attention of the applicant, and a permit shall not be issued until the Board's experts determine that all equipment is available and properly functioning. If the results of the initial evaluation are deemed unsatisfactory, the applicant may request another review.
- C. All facilities wherein enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia may be administered shall be inspected at least once every five (5) years beginning from the date of the initial permit, as designated by the Board, to ensure that all equipment is of the appropriate type and in good working order. The Board also shall have the discretion to inspect any dental facility at any time for good cause. Any permitted dentist with missing or malfunctioning equipment shall cease administering anesthesia until his/her dental facility has been properly equipped with the required equipment or until such malfunctioning equipment has been satisfactorily repaired and until such time as the Board is in receipt of proof that the equipment has been repaired to the Board's satisfaction.

8. Advanced Cardiac Life Support and Cardiopulmonary Resuscitation

- A. Any dentist using enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia shall at all times be ACLS certified or hold a certificate from a Board-approved course, and his/her auxiliary personnel must meet the requirements for Cardiopulmonary Resuscitation (hereinafter referred to as "CPR") as set forth in Rule 1.45 Board Regulation 45.

- B. A dentist utilizing nitrous-oxide inhalation anxiolysis and his/her auxiliary personnel must meet the requirements for CPR as set forth in Rule 1.45 Board Regulation 45.
9. Renewal of Enteral Conscious Sedation, Parenteral Conscious Sedation, and/or General Anesthesia Permits
- A. Any dentist holding a permit of authorization issued by the Board shall be subject to review, and such permit must be renewed at the same time as the dentist renews his/her Mississippi dental license.
 - B. The Board shall, in accordance with its laws, rules, and regulations, together with the appropriate and required information and renewal fee, renew the enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia permit, unless the holder is informed in writing that a re-evaluation of credentials and/or facilities is to be required. In determining whether such re-evaluation is necessary, the Board shall consider such factors as it deems pertinent, including, but not limited to, patient complaints and reports of adverse occurrences.
 - C. At the time the dentist renews his/her enteral conscious sedation, parenteral conscious sedation, and/or general anesthesia permit, he/she shall submit proof of current ACLS certification and current CPR certification for all dental auxiliaries who have direct patient care responsibilities.
 - D. Certification cards issued by the Board upon renewal of anesthesia permits shall indicate the date wherein the required periodic five (5) year inspection is due to be performed by the Board.

10. Permit Fees

For the purpose of determining permit fees only, the fees for enteral conscious sedation and/or parenteral conscious sedation permits shall be deemed to be equivalent to those as set forth in Miss. Code Ann. § 73-9-43 and Rule 1.37 Board Regulation 37 for general anesthesia permits.

11. Penalties for Non-Compliance Violating the provisions of this regulation shall subject the dentist to disciplinary action, after a hearing, as provided by the Mississippi laws pertaining to the practice of dentistry.

History: Regulation Twenty-Nine adopted by the Mississippi State Board of Dental Examiners June 4, 1987; amended May 4, 1990; amended September 25, 1992; amended December 4, 1992; amended December 8, 1995; amended February 9, 1996; amended July 21, 2000; amended December 7, 2001; amended March 5, 2004; amended November 19, 2004; amended

January 7, 2005; amended December 2, 2005; amended February 24, 2006; amended October 19, 2007; amended May 16, 2008; amended August 19, 2011

Source: Miss. Code Ann. § 73-9-19.